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APPLICANTS

Wolfgang John, Eiscnstadt, AUSTRIA;

** CONTINUING DATA ***** O/K

** FOREIGN APPLICATIONS ***** O/K

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IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **

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Verified and Acknowledged	Examiner's Signature: <i>Antoni Dami</i> Initials: <i>ABH</i>				

ADDRESS

Roger T. Frost, Esq.
 Merchant & Gould P.C.
 P.O. Box 2903
 Minneapolis, MN
 55402-0903

TITLE

Flat flex cable

FILING FEE RECEIVED 450	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____
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